

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Majority PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00495028 </div>		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee SKDKnickerbocker LLC			Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 27 / 2016</div>		
Mailing Address 1150 18th St NW Ste 800			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>		
City Washington		State DC	Zip Code 20036-3845		Transaction ID : VN7GDA6NBX8
Purpose of Expenditure Media Production Costs - Estimate		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Love, Mia, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">364226.69</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee The Baughman Company, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 27 / 2016</div>		
Mailing Address 1592 Union St Ste 401			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">11723.98</div>		
City San Francisco		State CA	Zip Code 94123-4505		Transaction ID : VN7GDA6NBZ3
Purpose of Expenditure Direct Mail - Estimate		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Reed, Thomas, W., , II			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">35171.94</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">16723.98</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Lapp, Alexandria, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>		

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The Baughman Company, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016		
Mailing Address 1592 Union St Ste 401			Amount 14729.35		
City San Francisco	State CA	Zip Code 94123-4505	Transaction ID : VN7GDA6NC01		
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Coffman, Michael, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought		1152389.77	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee The Baughman Company, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016		
Mailing Address 1592 Union St Ste 401			Amount 24380.75		
City San Francisco	State CA	Zip Code 94123-4505	Transaction ID : VN7GDA6NC19		
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Bera, Amerish, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought		488299.46	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	39110.10
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Lapp, Alexandria, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 28 / 2016

Signature

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Full Name of Payee The Baughman Company, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 1592 Union St Ste 401		Amount 14729.34	
City San Francisco	State CA	Zip Code 94123-4505	Transaction ID : VN7GDA6NC27
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Trump, Donald, J., ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 3050 K St NW Ste 100		Amount 123500.00	
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GDA6NBY6
Purpose of Expenditure Television Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Hollingsworth, Trey, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	138229.34
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	194063.42

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Lapp, Alexandria, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 28 / 2016

Signature